

COPY

Disclosure Report Cover

Amendment

 Yes NoUse this form for general report and committee information, must be signed and submitted along with other detailed forms
Do not use this form to update information

1. Committee Information

a. Full Name

JAMES N ZIGLAR JR.

c. ID Number

UCQC 58

b. Mailing Address (include City, State and Zip Code)

JAME N ZIGLAR JR
PO BOX 926
RURAL HALL NC 27045

d. Date Filed

e. Phone Number

969-4699

2. Report Year

2008

3. Period Start Date (mm/dd/yy)

1-1-09

4. Period End Date (mm/dd/yy)

6-12-09

5. Treasurer Full Name

C. THOMAS GRIGGS

6. Type of Committee (Check One)

- Candidate Campaign
 Joint Fundraiser
 Referendum
 Party
 PAC
 Legal Expense Fund

7. Type of Fund (if applicable, check one)

- "Booster Fund"
 Building Fund
 NC Political Party Financing Fund
 Presidential Election Year Candidates Fund
 NC Public Campaign Financing Fund
 Other: COUNTY COMMISSIONER

8. Number of Fundraisers this Report

9. Type of Report (check only one type of report from one category)

Municipal

- Organizational
 Thirty-five day
 Pre-primary
 Pre-election
 Pre-runoff
 Semi-annual
 Mid Year
 Year End
 Final
 Special

State/County

- Organizational
 Quarterly
 First
 Second
 Third
 Fourth
 Semi-annual
 Mid Year
 Year End
 Final
 Special

Referendum

- Organizational
 Pre-referendum
 Final
 Supplemental Final
 Annual
 Special

10. Special Report Name

11. Account Information

a. Financial Institution Full Name

FIRST CITIZENS BANK

b. Purpose

CAMPAIGN FUNDS

c. Account Code

FC-1

d. Period Begin Balance

\$ 1069.00

RECEIVED

2009 JUN 11 AM 11:19

FIRST CITIZENS BANK
BOARD OF ELECTIONS

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other undisclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board of Elections

C THOMAS GRIGGS

Printed Name of Signer

C Thomas Griggs

Signature of Appointed Treasurer

6-12-09

Date

FOR OFFICE USE ONLY

Date Received:

6-11-09

Employee:

Judy Spear

Delivery Method

- Normal Mail
 Registered Mail
 Hand Delivered
 Electronically Filed

Date Postmarked:

Date Scanned:

Date Data Entered:

Employee:

 Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment

Yes No

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
JAMES N ZIGLAR JR				UCQC 58	
Start of Election Cycle: January 1, 2008			Total this Reporting Period		Total this Election Cycle
4) Cash on Hand at Start			\$ 1069.00		\$ 0
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$		\$ 470.00	
6) Contributions from Individuals (CRO-1210)		\$		\$ 5131.22	
7) Contributions from Political Party Committees (CRO-1220)		\$		\$ 162.17	
8) Contributions from Other Political Committees (CRO-1230)		\$		\$	
9) Loan Proceeds (CRO-1410)		\$		\$ 16150.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$		\$	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$		\$	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$		\$	
11c) Outside Sources of Income (CRO-1250)		\$		\$	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c and 11d)			\$ 0		\$ 21913.39
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$		\$ 20594.00	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$		\$	
13c) Coordinated Party Expenditures (CRO-1310)		\$		\$	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$		\$	
15) Loan Repayments (CRO-1420)		\$ 789.94		\$ 789.94	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$		\$ 250.39	
17) In-Kind Contributions (CRO-1510)		\$		\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)			\$ 789.94		\$ 21634.33
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)			\$ 279.06		\$ 279.06
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 15360.06			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$			
24) Account Transfers Within the Committee (CRO-1720)		\$			
25) Administrative Support (CRO-1710)		\$		\$	
26) Forgiven Loans (CRO-1440)		\$		\$	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$		\$	
28) Contributions to be Refunded (CRO-1215)		\$		\$	

Loan Repayments

Amendment

Pg 1 of 1 Yes No

Use this form to report payments on an existing loan.

1. Committee Full Name (and Fund if applicable)				2. ID Number	
JAMES N ZIGLAR JR				UCQC 58	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
JAMES N ZIGLAR JR PO Box 926 RURAL HALL NC 27045 969-4699					
				c. Original Loan Date	
				3-11-08	
				d. Original Loan Amount	
				\$ 2000.00	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$ 1210.06		CHECK	3-9-09	\$ 789.94	
\$				\$	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Original Loan Date	
				d. Original Loan Amount	
				\$	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$				\$	
\$				\$	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip)				b. Comments	
				c. Original Loan Date	
				d. Original Loan Amount	
				\$	
e. Remaining Loan Balance	f. Account Code	g. Form of Payment	h. Date (mm/dd/yyyy)	i. Repayment Amount	
\$				\$	
\$				\$	
4. Total only this Page				\$ 789.94	
5. Total of ALL CRO-1420 Pages <i>(This line must be on line 15 of Detailed Summary Page CRO-1100)</i>				\$ 789.94	

Outstanding Loans

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
JAMES N ZIGLAR JR		URQC 58	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
JAMES N ZIGLAR JR PO Box 926 RURAL HALL NC 27045 969-4699		RETIRED DENTIST	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			3-11-08
			f. End Date (mm/dd/yyyy)
g. Rate %	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
		\$ 2000.00	\$ 1210.06
k. Full Name of Lending Institution		l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
JAMES N ZIGLAR JR PO Box 926 RURAL HALL NC 27045 969-4699		DENTIST	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		RETIRED	4-30-08
			f. End Date (mm/dd/yyyy)
g. Rate %	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
		\$ 2000.00	\$ 2000.00
k. Full Name of Lending Institution		l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
JAMES N ZIGLAR JR P.O. Box 926 RURAL HALL NC 969-4699		DENTIST	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		RETIRED	5-20-08
			f. End Date (mm/dd/yyyy)
g. Rate %	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
		\$ 1500.00	\$ 1500.00
k. Full Name of Lending Institution		l. Loan Number	
4. Total only this Page			\$ 4710.06
5. Total of ALL CRO-1430 Pages			\$ 15360.06
<small>(This line must be on line 21 of Detailed Summary Page CRO-1100)</small>			

Outstanding Loans

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
JAME N ZIGLAR JR		UCQC 58	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
JAMES N ZIGLAR JR P.O. BOX 926 RURAL HALL NC 27045 969-4699		DENTIST	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		RETIRED	8-28-08
			f. End Date (mm/dd/yyyy)
g. Rate %	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
		\$ 1450.00	\$ 1450.00
k. Full Name of Lending Institution		l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
JAMES N ZIGLAR JR PO BOX 926 RURAL HALL NC 27045 969-4699		DENTIST	
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
		RETIRED	9-8-08
			f. End Date (mm/dd/yyyy)
g. Rate %	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
		\$ 9200.00	\$ 9200.00
k. Full Name of Lending Institution		l. Loan Number	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Job Title/Profession	d. Comments
		c. Employer's Name/Specific Field	e. Start Date (mm/dd/yyyy)
			f. End Date (mm/dd/yyyy)
g. Rate %	h. Security Pledged	i. Original Loan Amount	j. Remaining Loan Balance
		\$	\$
k. Full Name of Lending Institution		l. Loan Number	
4. Total only this Page		\$ 10650.00	
5. Total of ALL CRO-1430 Pages		\$ 15360.06	
<small>(This line must be on line 21 of Detailed Summary Page CRO-1100)</small>			

North Carolina
State Board of Elections
506 N Harrington Street
Raleigh, NC 27603

Kimberly Westbrook Strach
Deputy Director – Campaign Reporting

Mailing Address
PO Box 27255
Raleigh, NC 27611-7255
(919) 733-7173
Fax: (919) 715-8047

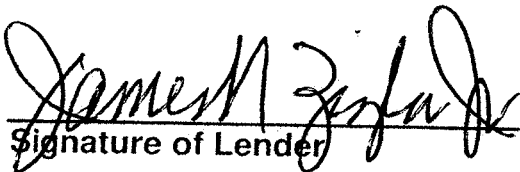
Forgiven Loan Statement

This form is used to report a loan that has been forgiven by the lender. The lender's signature is required on this form and it must accompany the next filed report

Name of Lender:	JAMES N ZIGLAR JR.
Committee receiving loan:	JAMES N ZIGLAR, JR.
Date of loan:	3-11-08
Amount of original loan:	2000.00
*Amount of loan to be forgiven:	1210.06

I, JAMES N ZIGLAR JR., do not wish to be reimbursed for the amount of the loan indicated above* and will consider the amount loaned a contribution to the committee.

I understand and confirm no other parties are responsible for payment of this loan. I may not forgive a loan for which there is an outstanding balance owed to any source.


Signature of Lender


Signature of Committee Treasurer

Note: This Statement is to be filed with the Election Board where the committee's reports are filed.

North Carolina
State Board of Elections
506 N Harrington Street
Raleigh, NC 27603

Kimberly Westbrook-Strach
Deputy Director -- Campaign Reporting

Mailing Address
PO Box 27255
Raleigh, NC 27611-7255
(919) 733-7173
Fax: (919) 715-8047

Forgiven Loan Statement

This form is used to report a loan that has been forgiven by the lender. The lender's signature is required on this form and it must accompany the next filed report

Name of Lender:	JAMES N ZIGLAR JR
Committee receiving loan:	JAMES N ZIGLAR JR
Date of loan:	4-30-08
Amount of original loan:	2000.00
*Amount of loan to be forgiven:	2000.00

I, JAMES N ZIGLAR JR, do not wish to be reimbursed for the amount of the loan indicated above* and will consider the amount loaned a contribution to the committee.

I understand and confirm no other parties are responsible for payment of this loan. I may not forgive a loan for which there is an outstanding balance owed to any source.

James N Ziglar Jr.
Signature of Lender

Thomas Briggs
Signature of Committee Treasurer

Note: This Statement is to be filed with the Election Board where the committee's reports are filed.

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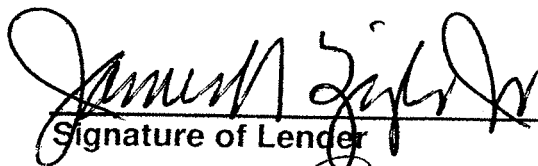
Forgiven Loan Statement

This form is used to report a loan that has been forgiven by the lender. The lender's signature is required on this form and it must accompany the next filed report

Name of Lender:	JAMES N ZIGLAR JR
Committee receiving loan:	JAMES N ZIGLAR JR
Date of loan:	5-20-08
Amount of original loan:	1500.00
*Amount of loan to be forgiven:	1500.00

I, JAMES N ZIGLAR JR, do not wish to be reimbursed for the amount of the loan indicated above* and will consider the amount loaned a contribution to the committee.

I understand and confirm no other parties are responsible for payment of this loan. I may not forgive a loan for which there is an outstanding balance owed to any source.


Signature of Lender


Signature of Committee Treasurer

Note: This Statement is to be filed with the Election Board where the committee's reports are filed.

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Raleigh, NC 27603

Kimberly Westbrook-Strach
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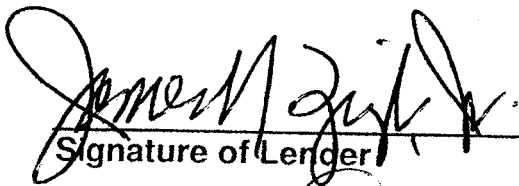
Forgiven Loan Statement

This form is used to report a loan that has been forgiven by the lender. The lender's signature is required on this form and it must accompany the next filed report

Name of Lender:	JAMES N ZIGLAR JR
Committee receiving loan:	JAMES N. ZIGLAR JR
Date of loan:	8-28-08
Amount of original loan:	1450.00
*Amount of loan to be forgiven:	1450.00

I, JAMES N ZIGLAR JR, do not wish to be reimbursed for the amount of the loan indicated above* and will consider the amount loaned a contribution to the committee.

I understand and confirm no other parties are responsible for payment of this loan. I may not forgive a loan for which there is an outstanding balance owed to any source.


Signature of Lender


Signature of Committee Treasurer

Note: This Statement is to be filed with the Election Board where the committee's reports are filed.



North Carolina
 State Board of Elections
 506 N Harrington Street
 Raleigh, NC 27603

Kimberly Westbrook-Strach
 Deputy Director – Campaign Reporting

Mailing Address
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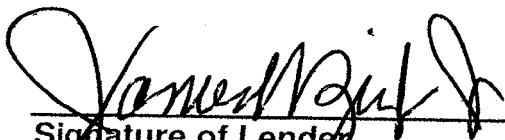
Forgiven Loan Statement

This form is used to report a loan that has been forgiven by the lender. The lender's signature is required on this form and it must accompany the next filed report

Name of Lender:	JAMES N ZIGLAR JR
Committee receiving loan:	JAMES N ZIGLAR JR
Date of loan:	9-8-08
Amount of original loan:	9200.00
*Amount of loan to be forgiven:	9200.00

I, JAMES N ZIGLAR JR, do not wish to be reimbursed for the amount of the loan indicated above* and will consider the amount loaned a contribution to the committee.

I understand and confirm no other parties are responsible for payment of this loan. I may not forgive a loan for which there is an outstanding balance owed to any source.



 Signature of Lender



 Signature of Committee Treasurer

Note: This Statement is to be filed with the Election Board where the committee's reports are filed.

**CAMPAIGN REPORT DISCREPANCIES
REPLY REQUIRED**

TO: Treasurer C. Thomas Griggs
Committee James N. Ziglar, Jr. for County Commissioner
Address PO Box 636
Rural Hall, NC 27045

FROM: Campaign Finance Office REPORT IN QUESTION:
Final Report

DATE: June 12, 2009

A recent preliminary audit of reports filed revealed the following discrepancies. Please supply this office with the missing or corrected information in order to complete the reports. A more detailed audit of the reports listed will be conducted after the following information is provided.

This is your first notice. You must respond within thirty days of receipt of this notice.

Failure to respond will result in noncompliance. In order to comply with the required information, the forms to amend are provided for completion. Amend only the forms required.

- The depository information was not listed on the Political Committee Disclosure Report.
- Addresses were either missing or incomplete. Contributions received without the contributor's complete name and mailing address that remain incomplete for forty-five (45) days are considered anonymous and must be paid over to the State Board of Elections for deposit to the general fund of the State. All disbursements must be listed by name and complete mailing address of the payee.
- Joint contributions, which are prohibited, were listed on the Report of Contributions. You must determine the individual amount of contribution for each contributor.
- Some or no dates were shown on the reports. A date is required for each entry.
- Details were not provided for the sums listed on the Detailed Summary Page
- Method of payment not provided.
- Contributions over \$50 are listed with "cash" being the method of payment.
- Contributions over \$50 are listed as "aggregated individual contribution" (AIC).
- The ending balance is negative. The Committee cannot operate on a negative balance.

- Some of the occupation information was incomplete or incorrect on the Itemized Receipts page(s).

Name of contributor(s):

- A contribution from a business entity/non-registered committee was listed. The contribution must be paid to the Civil Penalty and Forfeiture Fund and reported as a disbursement on the next report.
- The purpose of expenditure was not listed on the Itemized Disbursements page.
- Disbursements for media expenses are paid with cash.
- Disbursements over \$50 that are not for postage are paid with cash.
- "Sum to date" information not provided.
- We are in receipt of a Final Report, but are unable to close the Committee because there is a remaining balance of \$ 279.06.
- No matching "In Kind" entry. "In Kind" contributions must be disclosed in the Itemized Receipts and Disbursements pages. You will also need to amend your "Detailed Summary Page" to reflect these changes.
- Contributions from the following contributors exceed the \$4,000 per election limit:

The contribution amount exceeding \$4,000 must be returned to the contributor, a copy of the refund check sent to this office, and the refund reported on the next scheduled report. If the contributor is the spouse, sibling, or parent of the candidate, please advise in writing.

- OTHER CRO-1100 – line 19 – final report should reflect a zero balance. Amend with the CRO-1000, 1100 and other necessary forms to achieve zero balance by disclosing missing expenditures. Thank you.

Please send your reply to : Judy J. Speas
Forsyth County Board of Elections
201 N. Chestnut Street
Winston-Salem, NC 27101

If you have any questions please refer to the Campaign Finance section on the SBOE website, www.sboe.state.nc.us, or call (919)733-7173.

FOR THE CAMPAIGN FINANCE OFFICE: